FORM D

96311 UNITED STATES SECURITIES AND EXCHANGE COMM

Washington, D.C. 20549

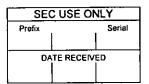
FORM D



(check if this is an amendment and name has changed, and indicate change.)

OMB APPROVAL				
OMB Number:	3235-0076			
Expires: May 31, 2005				
Estimated average burden				

hours per response 16.00



Class A-1 Common Offering Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(b)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(b) Type of Filing: New Filing Amendment
and A Property of the Control of the
A. BASIC IDENTIFICATION DATA APR 1 / 2007
1. Enter the information requested about the issuer THOMSON
Glen Echo Country Club, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (314) 383-1500
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code)
Brief Description of Business Country Club
Type of Business Organization
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):.
business trust limited partnership, to be formed
Month Year
Actual or Estimated Date of Incorporation or Organization: 0 3 0 6
GENERAL INSTRUCTIONS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on

Filing Fee: There is no federal filing fee.

not be filed with the SEC.

which it is due, on the date it was mailed by United States registered or certified mail to that address.

photocopies of manually signed copy or bear typed or printed signatures.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

1 of 11

			NTIFICATION DATA		
2. Enter the information requ	ested for the follow	wing:			
•		r has been organized within	•		
 Each beneficial owne 	r having the power	r to vote or dispose, or direc	ct the vote or disposition of	, 10% or more of a	class of equity securities of the issu
 Each executive office 	r and director of c	orporate issuers and of corp	oorate general and managing	g partners of partne	ership issuers; and
 Each general and mar 	naging partner of p	artnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Ralph Canter					
Business or Residence Addres	s (Number and Str	eet, City, State, Zip Code)			
3401 Lucas and Hunt Rd.		3121			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				· · · · · · · · · · · · · · · · · · ·
James Gidcumb					
Business or Residence Address	s (Number and Str	reet, City, State, Zip Code)			
3401 Lucas and Hunt Rd.		3121	Executive Officer	□ Director	General and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	M Executive Officer	M Director	Managing Partner
Full Name (Last name first, if	individual)				20000
David Grubbs	Olivela and St	cat City State Zin Code)	<u>_</u>		
Business or Residence Address	•	•			
3401 Lucas and Hunt Rd Check Box(es) that Apply:	St. Louis, MO 6:	Beneficial Owner	Executive Officer	Director	General and/or
Check Box(es) that Apply:	1 Tomoter	Deneneral Owner		Z Director	Managing Partner
Full Name (Last name first, if	individual)	· · ·			
Vincent Barreca					
Business or Residence Address	ss (Number and Str	reet, City, State, Zip Code)			
3401 Lucas and Hunt Rd	St. Louis, MO 63	3121			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Dennis M. Brynes Business or Residence Addres	(North on and St	root City State 7in Code)			
	,	•			
3401 Lucas and Hunt Rd Check Box(es) that Apply:	St. Louis, MO 6.	Beneficial Owner	Executive Officer	□ Director	General and/or
Check Box(es) that repply.	LJ 1 tomoter			<u></u>	Managing Partner
Full Name (Last name first, if	individual)		 _		
Kevin R. Farrell	·				
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
3401 Lucas and Hunt Rd.	St. Louis, MO 6	3121	Evenutive Officer	N Disaster	Ganaral and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Steven M. Hallemann	-				
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Code)			
3401 Lucas and Hunt Rd	St. Louis, MQ 6	3121		·	
	(Use bla	nk sheet, or copy and use a	dditional copies of this shee	et, as necessary)	

			NTIFICATION DATA			
2. Enter the information reque	ested for the follow	ving:				
• Each promoter of the	issuer, if the issuer	has been organized within	the past five years;			
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue						
Each executive officer	r and director of co	orporate issuers and of corp	orate general and managing	g partners of partne	ership issuers; and	
Each general and man	aging partner of p	artnership issuers.				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Gene M. Henderson						
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)				
3401 Lucas and Hunt Rd., S	St. Louis, MO 63	121				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)	, ,,				
Benedict G. Janson					····	
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)				
3401 Lucas and Hunt Rd., S		3121	Dr. Com	™ D!	Canaral and/or	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Stephen J. Kohnen Business or Residence Addres	s (Number and Str	eet City State Zin Code)				
	•					
3401 Lucas and Hunt Rd., S Check Box(es) that Apply:	St. Louis, MO 63	Beneficial Owner	Executive Officer	Director	General and/or	
C.10011 2011(00) 111101 - FF-3			_		Managing Partner	
Full Name (Last name first, if	individual)	 -	·	 -	-	
Business or Residence Addres	s (Number and Str	reet, City, State, Zip Code)				
Charle Danier Ababa	December	Beneficial Owner	Executive Officer	Director	General and/or	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Excedite Officer	Director	Managing Partner	
Full Name (Last name first, if	individual)					
Business or Residence Addres	s (Number and Sti	eet, City, State, Zip Code)				
			-	, - I' ·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
(water riverse and)	,					
Business or Residence Address	s (Number and St	reet, City, State, Zip Code)			, , , , , , , , , , , , , , , , , , ,	
<u></u>						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Code)				

						NICORE	A TELEGRAT :	DOUT	PERDIN			·		
					B.	INFORM	A HUN A	RROUT O	FFERING	<u> </u>			Yes	No
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes			
.1.														
2	Answer also in Appendix, Column 2, if filing under ULOE.								\$ <u>50</u> ,	000				
۷.	2. What is the minimum investment that will be accepted from any individual?								Yes	No				
3.	Does th	se offering	nermit io	int owners	hin of a si	nole unit?								\boxtimes
<i>3</i> .	Enter t	he inform:	ation requ	ested for	each ners	on who h	as been o	or will be	paid or s	≥iven. dire	ectly or in	ndirectly, a		_
ч.	commi	ssion or si	milar rem	uneration	for solicita	ation of p	ırchasers	in connect	ion with s	ales of se	curities in	the offerir	ıg.	
	If a per	son to be	listed is a	n associate	ed person	or agent o	f a broker	or dealer	registered	with the S	SEC and/o	r with a sta	ite ob	
	or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
	a broke	i or dealer,	you may	Set torus u					·					
Ful	l Name	(Last name	first, if ir	idividual)										
Bu	siness or	Residence	Address	(Number	and Street,	City, Stat	e, Zip Co	de)						
Na	me of A	ssociated E	Broker or I	Dealer										
Sta		hich Perso												
	(Check	"All State	s" or chec	k individu	ual States)							•••••		States
	ΑĹ	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GΑ	HI	ID	
	П	IN	IA	KS	KY		ME	MD	MA	ET MI OH	MN	MS	MO	
	MT	NE	NA NA	NH	БZ	LA MM	MY	ыd	ND	ОН	<u>ok</u>	OR	MO PA	
	RI	sq	SD	TN	тx	TU	VT	VA	AW	₩V	WI	WY	PR	
Ful	l Name	(Last name	e first, if i	ndividual)										
The Code of the Co														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Nie	of A	annintad I	Proker or 1	Danler						<u> </u>				·····
Na	Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
Sta		"All State											☐ All	States
	(Check	"All State	es" or che	ck individ	uai States)				_		_			States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA	KS NH	ΚŸ	LA	ME	MD	MA	MI	MM	MS	MO	
•	MΤ	IN NE	IA NV	ŃН	XY IX	LA M TÜ	NY VT	MD NC VA	MA ND WA	MI OH WV	MI OK WM	MS OR WY	MO PA PR	
	RI	sc	SD	TN	TX	UT	VT	ΑV	WA	WV	WI	WY	PR	
Full Name (Last name first, if individual)														
run ivame (Last name inst, ii muividuai)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Du	3111033 0	residenc	e / taaress	(Trainious		, 011, 014	, <u></u> ,	,						
Na	me of A	ssociated I	Broker or	Dealer	<u> </u>									
114			or or	2 0 0 0 0 0										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)														
	<u>`</u>									ET.	_	_	_	
	AL	AK	AZ	AR	CA	CO T	CT	DE	<u>pd</u>	FE H	GA Mod	HI	ID MO	
	11	IN	IA	KS	KY NJ	LA MM	ME		EEZ MAM	OH	ok MN	MS OR	MO PA	
	MT RI	NE	NV SD	ин	СИ XT	NM UT	мY VT	VA VA	MA ND WA	DH W∇	MI	WY WY	PR	
	RI	sd	SU	TN	[T,Y]	lo.t.]	[LA]	l A 🔠	MA	ןיי יין	<u>™</u> ⊥	[** ±]	£	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	ROCEEDS	<u></u>
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	Amount Almander
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 2,500,000	\$ <u>0</u>
	Convertible Securities (including warrants)	\$	S
	Partnership Interests	\$	\$
	Other	\$	\$
	Total	\$2,500,000	\$0
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
-		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	<u> </u>
	Non-accredited !nvestors		_ \$
	Total (for filings under Rule 504 only)	0	_ \$0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	The second secon	т	Dallas Amazont
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		_ \$
	Regulation A		_ \$
	Rule 504		_ \$
	Total		_ \$
4.			
	Transfer Agent's Fee		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 25,000
	Accounting Fees		
	Engineering Fees	_	_
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		\$ 25,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	KUCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ <u>2,475,000</u>
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	□\$	
Purchase of real estate	 \$	 \$
Purchase, rental or leasing and installation of machinery and equipment		 \$
Construction or leasing of plant buildings and facilities	<u></u>	□\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□\$	□ \$
Repayment of indebtedness	□\$	□\$
Working capital	∑ \$2,475,000	
Other (specify):		 \$
	□\$	
Column Totals	≥ \$2,475,000	\$

⊠\$<u>2,475,000</u>

Total Payments Listed (column totals added)

D	FEDER	AL	SIGNA	TURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Glen Echo Country Club, Inc.	Male	April 1, 2007
Name (Print or Type)	Title (Print or Type)	
Ralph Canter	President	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

